IAP16 Rec'd PCT/PTO 25 SEP 2006

8.		A check in the amount of \$ to cover the above fees is enclosed.		
b.	X	Please charge my Deposit Account No. <u>50-2478 (039371-20)</u> in the amount of \$ <u>800.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed.		
C.	X	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-2478 (039371-20). A duplicate copy of this sheet is enclosed.		
d.		Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.				
SEND ALL CORRESPONDENCE TO:				
Customer No. 25570			1 homes I cole	
oudiomer No. 20010		1101 110, 20010	SIGNATURE	
Ro	bert	s Mlotkowski & Hobbes	Thomas W. Cole	
P.	O. Bo	ox 10064	NAME	
McLean, VA 22102			•	
			28,290	
•			REGISTRATION NUMBER	

65/16/2657 HPERSON 00000001 502478 10594119

 01 FC:2633
 100.00 DA

 62 FC:2642
 200.00 DA

 93 FC:2641
 150.00 DA

 64 FC:2614
 300.00 DA